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	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Pocket Number		
	Oubstitute for Fulfit F 10-073									101780.100		
			CLAIMS AS (Co	FILED		ART I (Column 2)		SMALL ENTITY		OR		R THAN ENTITY
		FOR	NUMB	NUMBER FILED		NUMBER EXTRA		RATE	FEE	•	RATE	FEE
		SIC FEE CFR 1.16(a))	í	<i>j</i>					\$	OR		s
		TAL CLAIMS CFR 1.16(c))	VA	minus 2	0 = 1.			x \$ =		OR	x s =	
	IND	EPENDENT CLAI CFR 1.16(b))	MS 15	minus		•		x \$=		OR	x \$=	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ \$=		OR	+ \$ =	
	* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL									OR	TOTAL	
:	CLAIMS AS AMENDED - PART II											
3/9/06	(Column 1) Walk Column 2) L Column 3)						Ζ.	SMALL I	ENTITY	OR		R THAN ENTITY
	AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		Total (37 CFR 1.16(c))	42	Minus	" 42			x s =		OR	'x \$=	
		Independent -(37 CFR 1.16(b))	1 6	Minus	5	= /		× s/00 =	190,00	OR	x s.' ' 1_	,
		FIRST PRESEN	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 C	FR 1.16(d))		+ \$ = 1		OR	+ \$=	ļ. ,
								Milial	1000	OR	TOTAL ADD LIFEE	
	(Column 1) (Column 2) (Column 3)										<u> </u>	
	AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	1	RATE	ADDI- TIONAL FEE
		Total (37 CFR 1.16(c))	•	Minus	**	= (x \$ =	,,,,,,	OB	x \$ =	, , ,
	Ä	Independent (37 CFR 1.16(b))	•	Minus	***	=				OR		
	AME		ATION OF MULTIPL	L DEPEND	ENT CLAIM (37 C	FR 1 16(d))		x s=		OR	× \$=	
		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + \$ = TOTAL								OR	+s= TOTAL	
		ADD'L FEE								OR	ADD'L FEE	
	(Column 1) (Column 2) (Column 3)											
	ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Ĭ	Total (37 CFR 1.16(c))	•	Minus	**	=	-	x s=		OR	x s=	
	AMENDMENT	Independent (37 CFR 1.16(b))	*	Minus	***	=		x s=		OR	x \$=	
	Ψ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))										
 		-			12.00		Ĺ	+ s=		OR	+ \$ = TOTAL	
		If the entry in o	olumn 1 is less tha	n the entr	v in column 2 wri	te "0" in column 3	3	ADD'L FEE		OR	ADD'L FEE	
•	•	* If the "Highest I	Number Previously Number Previously	Paid For	IN THIS SPACE	is less than 20,	ente	er "20". "3".				

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.